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CONFIRMATION NO. 6195

<b>SERIAL NUMBER</b> 10/649,236	<b>FILING OR 371(c) DATE</b> 08/27/2003 <b>RULE</b>	<b>CLASS</b> 546	<b>GROUP ART UNIT</b> 1625	<b>ATTORNEY DOCKET NO.</b> PC23251A
<b>APPLICANTS</b> Mark A. Dombroski, Waterford, CT; Michael A. Letavic, Mystic, CT; Kim F. McClure, Mystic, CT;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/407,177 08/30/2002				
<b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 11/21/2003</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <input type="checkbox"/> Allowed <input checked="" type="checkbox"/>		<b>STATE OR COUNTRY</b> CT	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 33
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials <i>[Initials]</i>	<b>INDEPENDENT CLAIMS</b> 1		
<b>ADDRESS</b> 23913				
<b>TITLE</b> Di and trifluoro-triazolo-pyridines anti-inflammatory compounds				
<b>FILING FEE RECEIVED</b> 984	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	